

LOUISIANA DEPARTMENT OF ENVIRONMENTAL QUALITY
SOLID WASTE PROCESSOR ANNUAL REPORT

TYPE I-A & II-A TRANSFER STATIONS, INCINERATORS, SHREDDERS, BAILERS, REFUSE-DERIVED FUEL FACILITIES, AND COMPACTORS
(To Complete Please Refer to the Detailed Instructions)

1. Site Identification Number _____
2. Permit Number _____
3. Agency Interest Number _____
4. Name of Permit Holder _____
5. Name of Processing Facility _____
6. Mailing Address _____ Parish _____
Physical Address _____
Latitude ____°-____'-____" Longitude ____°-____'-____" Datum (circle one) NAD83 WGS84
7. Contact _____ Telephone (____) _____
8. Method of Processing: ☐ Transfer Station ☐ Incinerator/Waste Handling Facility
☐ Shredder ☐ Baler ☐ Compactor ☐ Refuse Derived Fuel Facilities
9. Summary of solid waste processed: Provide summary of solid waste received and processed.

(If additional sheets are required, please put the site identification number, permit number and the date on each sheet).

(A) Non-Industrial Waste	(B) Quantity of Waste Received For Processing	(C) Quantity of Waste Transported For Disposal	(D) Disposer ID Number
(E) TOTAL:			
(F) Quantity of Waste Received (In-State):			
(G) Quantity of Waste Received (Out-of-State):			

This report is to be submitted to the Office of Environmental Services (address below) no later than August 1 following the end of each reporting year. Failure to submit this report on or before August 1 following the end of each reporting year is a violation of your permit and LAC 33:VII.Subpart 1, and may result in enforcement action by the Department under the authority granted by the Louisiana Environmental Quality Act (the Act), La. R.S. 30:2001, et seq., and particularly by La. R.S. 30:2025(C), 30:2050.2 and 30:2050.3(B). The Department reserves the right to seek civil penalties in any manner allowed by law for each violation. Note: Submittal of an incomplete report or a report containing false or inaccurate information may also be considered a violation of your permit and LAC 33:VII.Subpart 1.

Waste Permits Division
Attn: SW Reports
P. O. Box 4313
Baton Rouge, LA 70821-4313

July 1, ____ thru June 30, ____

Page ____ of ____

Site Identification Number _____

Permit Number _____

10. **Type I-A Facilities:** This section applies only to Type I-A facilities. Provide a summary of the industrial waste received utilizing the waste code number that has been assigned to each industrial waste by the Administrative Authority. All like industrial wastes are to be reported together. Subtotals of all like industrial wastes are to be provided. Copy this form as necessary.

(A)Industrial Waste Code	(B)Quantity of Waste Received For Processing		(C)Quantity Of Waste Transported For Disposal	(D)Disposer ID Number	(E)Subtotals of Like Industrial Wastes
	Wet-Weight	Dry-Weight			
(F) TOTAL:					
(G) Quantity of Waste Received (In-State):					
(H) Quantity of Waste Received (Out-of State):					

July 1, _____ thru June 30, _____

Page _____ of _____

Site Identification Number _____

Permit Number _____

11. All facilities: Provide all calculations used to compute the quantity (expressed in wet-weight tons) of solid waste received at the facility.

12. CERTIFICATION: I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and based on my inquiry of those individuals immediately responsible for obtaining the information; I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature _____ Date _____

Name and Title _____

Print or type the name and title of the person signing the form

DETAILED INSTRUCTIONS FOR THE SOLID WASTE PROCESSOR ANNUAL REPORT

The Solid Waste Processor Annual Report covers solid waste processing activities for the period beginning July 1st and ending June 30th of each year. This report shall be submitted by August 1st following the end of each reporting year.

Note: This version of the form should be completed. Please do not edit, revise, or otherwise alter this form. Do not submit your own variation of this form. Any incorrect forms submitted will be considered incomplete and returned to the facility. All of the following information must be included. If any section is left blank, then the report will be considered incomplete and may be returned to the facility. Questions regarding the form may be directed to the Waste Permits Division at 225-219-3388.

1. Identification Number: Indicate the identification number that has been assigned to the processor by the Department of Environmental Quality. Also, enter the year in which the report applies.
2. Name of Permit Holder: Enter the name in which the permit has been issued.
3. Agency Interest Number: Indicate the identification number that has been assigned to the processor by the Department of Environmental Quality.
4. Permit Number: Enter the permit number for the facility in which this report applies. **Each individual permitted facility is to be reported on a separate form.**
5. Name of Processing Facility: Enter the name of the processing facility.
6. Mailing Address: Enter the mailing address for the facility, the parish location, the latitude (in degrees, minutes, seconds), the longitude (in degrees, minutes, seconds), and the datum used to obtain the latitude and longitude.
7. Contact: Enter the name of the person knowledgeable of the information submitted on the report and his telephone number.
8. Method of Processing: Enter the type of processing facility in which the report applies.
9. Summary of Solid Waste Processed: Amounts expressed in this report must be done so in wet-weight tons/year. **No other methods of reporting will be accepted.**

- (A) Non-Industrial Solid Waste: All waste other than industrial solid waste should be reported in this section of the report. Enter the two digit number that applies to the type(s) of waste processed at this facility.

01	Residential	08	Underground Storage Tank Corrective Action Waste
02	Commercial	09	Agricultural Waste
03	Trash	10	Stable
04	Woodwastes	11	Infectious Waste
05	Const/Demolition Debris	12	Friable Asbestos
06	Incinerator	13	Other, also specify name
07	Domestic Sewage Sludge		

- (B) Quantity of Waste Received for Processing: Enter the amount of each waste processed in wet-weight tons.
- (C) Quantity of Waste Transported For Disposal: Enter the amount of waste transported for disposal.
- (D) Disposer ID Number: Enter the disposer's identification number assigned by the Department of Environmental Quality.
- (E) TOTAL: Enter total quantity of waste received for processing and quantity of waste transported for disposal.
- (F) Quantity of Waste Received (In-State): Enter the amount of waste that was received for processing in wet-weight tons from in-state sources.
- (G) Quantity of Waste Received (Out-of-State): Enter the amount of waste that was received for processing in wet-weight tons from out-of-state sources.
10. Provide summary of industrial solid waste received for processing. All amounts expressed in this section shall be reported in wet-weight tons. Copy this form if additional sheets are needed.
- (A) Industrial Waste Number: Enter the industrial waste code number assigned to each waste stream by the Department of Environmental Quality.
- (B) Quantity of Waste Received for Processing: Enter in the amount of waste received for processing.
- (C) Quantity of Waste Transported for Disposal: Enter the amount of waste transported for disposal.
- (D) Disposer ID Number: Enter the disposer's identification number assigned by the Department of Environmental Quality.
- (E) Subtotal of Like Industrial Wastes: Enter the subtotals of each like industrial waste received by the facility.
- (F) TOTAL: Enter the total of waste received for processing and total waste transported for disposal.
- (G) Quantity of Waste Received (In-State): Enter the amount of waste that was received for processing from in-state sources.
- (H) Quantity of Waste Received (Out-of-State): Enter the amount of waste that was received for processing from out-of-state sources.
11. Provide all calculations used to compute the quantity of solid waste received at the facility.
11. Certification by signature: The Company's legally authorized representative for the site operations should sign the form. Print or type the date, the name and the title of the person signing the form.